

This portion *MUST* be returned with your payment to ensure per credit. THANK YOU

| |
|----------------------|
| ACCOUNT BILLED |
| MONTGOMERY, S. BRYCE |

| |
|--|
| PROPERTY NAME |
| MONTY CLAIMS #1-6 MIN #6519 |

| |
|-------------|
| PROPERTY ID |
| S450033 |

| |
|--------------|
| BILLING DATE |
| 6/26/1998 |

| |
|------------|
| AMOUNT DUE |
| \$ 100.00 |

| |
|---------------|
| AMOUNT PAID |
| <i>100.00</i> |

| |
|--|
| <input type="checkbox"/> FEE NOT ENCLOSED |
| Permittee requests an inspection to close out this permit. |

Hg
7/29/98

DIVISION OF OIL GAS AND MINING
1594 WEST NORTH TEMPLE SUITE 1210
PO BOX 145801
SALT LAKE CITY UT 84114-5801

| | |
|--------------------------|-----------------------|
| Change of Address | |
| Contact | <i>JB</i> |
| Address | |
| | |
| | |
| State | Zip |
| Phone | <i>(801) 295-8592</i> |

**Please make check payable to:
Division of Oil, Gas and Mining**